AN EVALUATION OF THE MANAGEMENT OF FAECAL INCONTINENCE IN TWO INTENSIVE CARE UNITS

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Aim: To discuss the results of a project undertaken evaluating current practice of faecal incontinence (FI) management in two intensive care units (ICU).

Methods: A systematic rapid appraisal in the management of FI in acute settings and observation of current practice in the ICU’s recording prevalence and aetiology of FI during a three month time frame. A clinical case-series evaluation was performed, using nursing staff observation and an audit data collection. Patients who had FI, had a range of observations recorded, aggregated for a 24hour period. Total in-patient and nursing staff skill mix was recorded, to estimate prevalence of FI. Descriptive analysis was performed.

Results: In the three month period a total of 45 patients were recorded as having FI, with a total in patient no. of 201. Prevalence of FI was 22%; mean age of patients with FI was 63. There was less pre-existing FI in patients, who developed FI, noted before admission. The most frequent amount of episodes of FI reported in 24 hours was between 2 and 5, mean 3.89; mean Waterlow score for patients with FI, was 20.45.

Conclusions: The prevalence rate of FI indicates there is a significant implication for nursing practice and training. Themes have emerged in the clinical decision-making processes in terms of choices for management of FI in ICU leading to the development of an intervention protocol. The high Waterlow scores for patients with FI in ICU suggest that there is a significant tissue viability risk.